NATIONAL CENTER FOR INFECTIOUS DISEASES (HCR)

Plans, directs, and coordinates a national program to improve the identification, investigations, diagnosis, prevention, and control of infectious diseases. In carrying out the mission, the Center: (1) provides leadership in investigation and diagnosis of infectious diseases of public health significance; (2) maintains surveillance of infectious diseases, disability, and death; (3) conducts applied and operational research related to definition, distribution, diagnosis, prevention, and control of infectious diseases, including vaccine development; (4) administers a biological reagents program which includes research on production, development of guidelines for production and utilization, and standardization, production, and distribution of reference reagents; (5) produces, evaluates, and distributes experimental vaccines, antisera and antitoxins, skin test antigens, and immune serum globulins to control and prevent laboratory infections and to prevent or minimize illness in certain population groups; (6) produces and distributes microbiological reference and working reagents not commercially available or of unreliable supply; (7) conducts applied research related to vectors of disease; (8) provides epidemic assistance; (9) maintains competence in the detection, identification, and control of rare, exotic, or tropical diseases; (10) provides reference diagnostic services; (11) provides technical assistance to states and localities and to other nations in the investigation, diagnosis, prevention, and control of infectious diseases; (12) provides scientific services in support of CDC=s laboratories; (13) provides epidemic aid to foreign nations and assists other nations in establishing and implementing infectious disease control programs; and (14) collaborates, as appropriate, with other Centers and Offices of the CDC in carrying out the above functions. (Approved 4/4/02)

Office of the Director (HCR1)

(1) Directs and manages the programs and activities of the National Center for Infectious Diseases (NCID); (2) provides leadership for the implementation of the Emerging Infections Plan to enhance the prevention and control of infectious diseases nationally and internationally; (3) provides leadership and guidance on policy, program planning and development, program management, and operations; (4) provides NCID-wide administrative and program services, and coordinates or assures coordination with the appropriate CDC staff offices on administrative and program matters; (5) provides liaison with other Governmental agencies, international organizations, including the World Health Organization, and other outside groups; (6) coordinates, in collaboration with the appropriate NCID and CDC components, international health activities relating to the prevention and control of infectious diseases; (7) advises the Director, CDC, on policy matters concerning NCID programs and activities; (8) coordinates development and review of regulatory documents and congressional reports; (9) analyzes health programs and proposed legislation with respect to NCID=s programs, goals and objectives; (10) provides leadership and support for NCID Programs in the areas of statistics and database management. (Approved: 11/10/2003)

Office of Administrative Services (HCR13)

(1) Plans, coordinates, and provides administrative and management advice and guidance to the NCID; (2) provides and coordinates NCID-wide administrative, management, and support services in the areas of fiscal management, personnel, travel, and other administrative services; (3) coordinates NCID requirements relating to procurement, materiel management, cooperative agreements, and reimbursable agreements; (4) provides leadership, guidance, and evaluation of administrative and management services performed at other geographic locations; (5) develops and implements administrative policies, procedures, and operations, as appropriate, for the NCID; and provides special reports and studies, as required, in the administrative management area; (6) maintains liaison with the Director, Office of Program Support, and Staff Service officials of the CDC.

Office of Health Communication (HCR14)

(1) Provides national leadership, in consultation with the NCID divisions and programs and the CDC Office of Communication, on the implementation of a comprehensive and integrated program of public health communications for the prevention and control of new and reemerging infectious diseases; (2) plans, develops, coordinates, and evaluates NCID-wide networks, partnerships, systems, and standards for public and professional health communications; (3) advises the Director and other NCID leadership staff on health communication strategies; (4) provides expert technical assistance, consultation, and training to NCID staff on theory-based health education, behavioral science, distance education, community organization, and electronic, print, and oral communications; (5) develops infectious disease prevention and control messages and promotes their dissemination to lay and professional audiences through various marketing techniques; (6) investigates, plans, develops, evaluates, and promotes the use of electronic technology to expand NCID=s health communications capacity and impact in collaboration with CDC communication and information offices, state and local health departments, and other prevention partners; (7) provides services, coordination, identification, guidance, and training for, and promotes usage of, state-of-the-art electronic communication technologies; (8) provides editorial and clearance assistance in the preparation of scientific articles and other documents and products for electronic and hard copy publication or presentation; (9) produces NCID-wide publications, including a newsletter, anthologies and compilations, and cross-cutting background documents; and manages NCID=s technical information resources, including document databases. (Approved 6/1/98)

Office of Surveillance (HCR16)

(1) Provides leadership, guidance, and coordination on NCID surveillance activities and systems; (2) provides NCID leadership on issues related to internal and external integration of CDC surveillance; (3) advises the Director on surveillance priorities for determining the burden of infectious diseases; (4) provides direction and oversight for the Emerging Infections Programs (EIPs) and sentinel surveillance networks through cooperative agreements with state/local health departments and other organizations; (5) provides technical assistance and direction for surveillance activities in the Epidemiology and Laboratory capacity cooperative agreements and other emerging infections activities/programs with a surveillance emphasis; (6) provides leadership for enhancing surveillance of infectious diseases through collaboration with managed care organizations; (7) provides technical leadership for and consultation on international infectious diseases surveillance activities; (8) provides NCID leadership on economic analysis and prevention effectiveness evaluation of infectious disease control and prevention activities; (9) in carrying out the above functions, collaborates, as appropriate, with other Centers, Institute, and Offices (CIOs) of the CDC. (Approved 6/1/98)

Division of Global Migration and Quarantine (HCR2)

(1) Administers a national quarantine program to protect the United States against the introduction of diseases from foreign countries; (2) administers an overseas program for the medical examination of immigrants and others with inadmissible health conditions that would pose a threat to public health and impose a burden on public health and hospital facilities; (3) maintains liaison with and provides information on quarantine matters to other Federal agencies, State and local health departments, and interested industries; (4) provides liaison with international health organizations, such as the Pan American Health Organization and the World Health Organization, and participates in the development of international agreements affecting quarantine; (5) conducts studies to provide new information about health hazards abroad, measures for their prevention, and the potential threat of disease introduction into the United States; and (6) provides logistic support to other programs of the Centers for Disease Control and Prevention in the distribution of requested biologicals and movement of biological specimens through U.S. ports of entry. (Approved: 5/18/2001)

Office of the Director (HCR21)

- (1) Manages, directs, and coordinates the activities of the Division; (2) provides leadership in development of Division policy, program planning, implementation, and evaluation; (3) identifies needs and resources for new initiatives and assigns responsibilities for their development; (4) coordinates liaison with other Federal agencies, State and local health departments, and interested industries;
- (5) coordinates liaison with international health organizations; (6) provides administrative services, including procurement, property and supply management, travel arrangements, space and facilities maintenance, and timekeeper coordination: (7) provides budgeting and fiscal management for the Division; (8) provides personnel support to the Division, both for Civil Service and Commissioned Corps employees, and assures that Division is in compliance with HRMO regulations for all personnel matters; (9) reviews and evaluates all administrative services for both headquarters and Quarantine Stations and provides policy procedures and guidance on such matters; (10) provides statistical and information systems consultation for study design and protocol development; (11) designs and implements database management systems in support of Division projects; (12) provides data analysis and statistical consultation in support of Division projects; (13) assists in production of and provides graphics support for presentations and publications related to Division objectives; and (14) evaluates new software for statistical analysis, database management, graphics production, geographic information systems, and other functions related to Division objectives. (Approved: 11/10/2003)

Field Operations Branch (HCR22)

(1) Develops, reviews, and evaluates operations in the United States and abroad involving inspection of persons, conveyances, airports, seaports, and importations; (2) conducts a continuing review of operations to assure the most effective application of epidemiologic data for prevalences of quarantinable and other specified diseases; (3) provides training and general supervision of field staff in the technical, management, and administrative aspects of quarantine operations; (4) works cooperatively and in concert with other Federal agencies at home and abroad in connection with improving and implementing new inspection activities at ports of entry; (5) inspects shipments of nonhuman primates to ensure compliance with CDC regulations regarding quarantine, conditions of shipment, and occupational safety and health of employees exposed to primates; (6) provides coordination and liaison with State and local health departments in all activities affecting the possible transmission and spread of quarantinable diseases; (7) performs quarantine inspections and medical inspections of aliens through staff at quarantine stations located at major ports of entry; (8) provides logistic support to other CDC programs in the distribution of requested biologicals; and (9) initiates surveillance and other health control measures at sea, air, and land ports of entry to the United States and its possessions. (Approved: 11/23/2003)

Surveillance and Epidemiology Branch (HCR23)

(1) Works to decrease morbidity and mortality due to infectious diseases among mobile populations crossing international borders destined for the United States (immigrants, refugees, migrant workers, and international travelers) and to decrease the risk of importing infectious diseases via animals and cargo; (2) develops geographic-specific infectious disease risk profiles among mobile populations, through the GeoSentinel Network and enhanced refugee screening examinations; (3) compares the utility of population-based approaches to screening for medical conditions among immigrants and refugees; (4) coordinates and provides immunization data and advice on health precautions for international travel, and develops and issues vaccination documents and validation stamps in accordance with the International Health Regulations; (5) directs and coordinates the collection, analysis, and dissemination of data on the worldwide incidence of quarantinable and other communicable diseases; (6) notifies the World Health Organization of the incidence of quarantinable diseases in the United States, as required by the International Health Regulations; and (7) maintains liaison with State and local health authorities, the travel industry, the World Health Organization, and other interested organizations.

(Approved: 5/7/01)

Arctic Investigations Program (HCRJ)

(1) Conducts surveillance of infectious diseases and conditions that impact the health of all residents of the circumpolar region with special emphasis on diseases of high incidence and concern among indigenous peoples of these regions; (2) designs and conducts epidemiologic studies to investigate the causes and risk factors for infectious diseases among residents of the Arctic and sub-Arctic, and conducts long-term studies to determine sequelae of various etiologic agents; (3) conducts laboratory research to evaluate existing laboratory tests, modifies methods as needed to apply the technology in the Arctic health-care setting, and develops new methods for diagnosis, treatment, and follow-up of health problems; (4) designs and implements studies to evaluate strategies for control of infectious diseases among residents and travelers in the Arctic in collaboration with, the State of Alaska, foreign ministries of health, universities, National Institutes of Health, organizations in Alaska, and other programs within CDC; (5) provides epidemiologic, statistical, computer, and laboratory consultation to organizations in Alaska, other health providers, and public and private health agencies; (6) assists local, national, and international agencies and organizations in developing guidelines for infectious disease prevention and control applicable to Arctic residents; (7) disseminates information on problems of particular import for residents of circumpolar regions; (8) provides training and technological assistance in epidemiology, statistics, and laboratory methodology to health-care personnel working or planning to conduct research in the Arctic; (9) participates in the Arctic Council proceedings, the International Union for Circumpolar activities and other international collaborative efforts to improve the health of all circumpolar populations; and (10) as the predominate Federal agency conducting infectious diseases research in the Arctic, provides local input as needed to the Office of the Director CDC, the Interagency Arctic Research and Policy Committee, Arctic Research Commission, and National Science Foundation as established under the U.S. Arctic Research and Policy Act of 1984. (Approved 7/13/01)

Office of the Director (HCRJ1)

(1) Manages, prioritizes, directs, and coordinates the activities of the Arctic Investigation Program (AIP); (2) provides leadership and guidance on policy, program planning and development, program management, and operations; (3) provides AIP-wide administrative services, and coordinates or assures coordination with the appropriate NCID and CDC staff offices on administrative and program matters; (4) provides liaison with other Governmental agencies, international organizations, and other outside groups; (5) advises and represents the Director, NCID on policy matters concerning American Indians and Alaska Natives and on Arctic health issues in general; (6) responsible for budget planning, formulation, program budget execution, monitoring, and response to budget audits and reviews; (7) responsible for facility management, security, and employee safety; (8) responsible for the editing, clearance, and tracking of manuscripts for publication, abstracts for presentation, and protocols for Institutional Review Board (IRB) and human subjects review; (9) provides technical aid, consultation, and training to AIP staff on health education, behavioral science, distance education, community organization, and electronic, print, and oral communications; and sponsors and participates in national and international meetings and conferences. (Approved 7/13/01)

Division of Healthcare Quality Promotion (HCRM)

Protects patients, protects healthcare personnel, and promotes safety, quality, and value in the healthcare delivery system by providing national leadership for (1) measuring, validating, interpreting, and responding to data relevant to healthcare outcomes, healthcare-associated infections/antimicrobial resistance, related adverse events, and medical errors among patients and healthcare personnel; (2) investigating and responding to outbreaks and emerging infections and related adverse events among patients, healthcare providers, or

associated with the healthcare environment; (3) detecting, evaluating, monitoring, and responding to emerging antimicrobial resistant pathogens and infections; (4) creating and evaluating the efficacy of new interventions designed to prevent infections/antimicrobial resistance, related adverse events, and medical errors; (5) promoting clinical microbiology laboratory quality; (6) promoting water quality in healthcare settings; (7) identifying effective interventions that prevent healthcare-associated infections/antimicrobial resistance, related adverse events, and medical errors among patients and healthcare personnel; (8) promoting the nationwide implementation of these interventions; and (9) evaluating the impact of their implementation across the spectrum of healthcare delivery sites. (Approved 1/30/01)

Office of the Director (HCRM1)

(1) Manages, directs, and coordinates the activities of the Division of Healthcare Quality Promotion (DHQP); (2) provides leadership and guidance on policy, program planning and development, program management, and operations; (3) provides DHQP-wide administrative and program services and coordinates or ensures coordination with the appropriate National Center for Infectious Diseases (NCID) and Centers for Disease Control and Prevention (CDC) staff offices on administrative and program matters; (4) provides liaison with other governmental agencies, international organizations, and other outside groups; (5) coordinates, in collaboration with the appropriate NCID and CDC components, global health activities relating to the prevention of healthcare-associated infections/antimicrobial resistance, related adverse events, and medical errors; (6) manages the division local area network (LAN) and coordinates the evolving LAN design with the Information Resources Management Office and the NCID LAN administrator; (7) provides hardware and software support to DHQP personnel in response to the changing information technology environment; and (8) advises the Director, NCID, on policy matters concerning DHQP activities. (Approved 1/30/01)

Epidemiology and Laboratory Branch (HCRM2)

(1) Coordinates rapid and effective epidemiologic and laboratory response to outbreaks and emerging threats associated with infections/antimicrobial resistance and related adverse events throughout the healthcare delivery system; (2) provides comprehensive laboratory support and expertise (including consultation; organism recovery and identification; microbiologic, toxin, chemical, and molecular assays; and strain typing) for investigations of recognized and emerging bacterial agents (including those resistant to available antimicrobials) in healthcare settings; (3) implements surveillance and response systems to detect emerging threats, including those related to agents of bioterrorism, among patients and healthcare personnel; (4) investigates novel and emerging mechanisms of antimicrobial resistance among targeted pathogens found in healthcare settings; (5) conducts epidemiologic and basic and applied laboratory research to identify new strategies to prevent infections/antimicrobial resistance, related adverse events, and medical errors, especially those associated with indwelling medical devices, contaminated products, dialysis, and water; (6) evaluates the accuracy of commercial microbial identification and susceptibility testing systems and products through research and facilitates their improvement; (7) provides leadership in reducing microbiology laboratory errors that affect patient outcomes by evaluating laboratory proficiency and promoting laboratory quality improvements; (8) investigates the role of biofilms, particularly those detected in indwelling medical devices and medical water systems, in medicine and public health; and (9) in collaboration with other CDC Centers, Institutes, and Offices (CIOs) and partners, provides expertise (e.g. environmental sampling, microbial assays, environmental engineering, disinfection strategies), research opportunities, and laboratory support for investigations of environmental sources of infections and related adverse events, including those related to bioterrorism. (Approved 1/30/01)

Prevention and Evaluation Branch (HCRM3)

(1) Supports local, state, national, and international efforts to prevent healthcare-associated infections/antimicrobial resistance, related adverse events, and medical errors using evidence-based recommendations and state-of-the art informatics and health communications strategies that enhance rapid and reliable information exchange; (2) develops and demonstrates the effectiveness of health communications, guidelines, recommendations, and other interventions to prevent healthcare-associated infections/antimicrobial resistance, related adverse events, and medical errors across the spectrum of healthcare delivery sites; (3) promotes the implementation of effective guidelines, recommendations, and other interventions to prevent healthcare-associated infections/antimicrobial resistance, related adverse events, and medical errors; (4) evaluates the impact of implementation of effective guidelines, recommendations, and other interventions on healthcare-associated infections/antimicrobial resistance, related adverse events, and medical errors; (5) provides consultation, guidance, and technical support to domestic and international partners on the prevention of healthcare-associated infections/antimicrobial resistance, related adverse events, and medical errors; and (6) develops and disseminates training tools and other strategies that enhance local capacity to protect patients and healthcare personnel and to promote quality healthcare. (Approved 1/30/01)

Healthcare Outcomes Branch (HCRM4)

(1) Evaluates the impact of healthcare-associated infections/antimicrobial resistance, related adverse events, and medical errors on healthcare outcomes and costs in order to establish priorities for DHQP intervention programs; (2) improves methods to measure healthcare outcomes, performance, and cost-effectiveness of intervention strategies; (3) improves systems by which healthcare organizations collect, manage, analyze, report, and respond to data on healthcare outcomes, healthcare-associated adverse events, and medical errors; (4) implements and coordinates the National Healthcare Safety Network (NHSN) (a representative sample of healthcare organizations that report data on targeted healthcare-associated adverse events and medical errors) to obtain locally relevant and scientifically valid benchmarks and performance measurements that promote healthcare quality and value; (5) provides national estimates of targeted adverse events and medical errors among selected populations of patients across the spectrum of healthcare delivery sites; and (6) provides national estimates of targeted occupational illnesses and injuries among healthcare workers across the spectrum of healthcare delivery sites. (Approved 1/30/01)

Scientific Resources Program (HCRL)

(1) Provides animals, animal and human blood products, glassware, mammalian tissue cultures, microbiological media, special reagents, and other laboratory materials in support of research and service activities to NCID laboratories and other CDC organizations; (2) installs, fabricates, modifies, services, and maintains laboratory equipment used in the research and service activities of CDC; (3) develops and implements applied research programs to expand and enhance the use of animal models necessary to support research and diagnostic programs and to improve breeding and husbandry procedures; (4) conducts both basic and applied research in cell biology and in the expansion of tissue culture technology as a research and diagnostic tool for infectious disease activities; (5) provides services for NCID investigators in protein and DNA synthesis and sequencing; (6) maintains a bank of serum and other biological specimens of epidemiological and special significance to CDC's research and diagnostic activities; (7) obtains and distributes experimental and orphaned vaccines, drugs, antisera, antitoxins, and immune globulins; (8) manages and distributes the inventory, maintains the computerized system database, and provides general technical service support for dispensing, lyophilizing, capping, and labeling CDC Reference Reagents; (9) provides support for liquid nitrogen freezers; (10) administratively and technically supports the CDC Animal Policy Board and the Atlanta Area Animal Care and Use Committee; (11) provides computer support services for the Program's activities; (12) receives, categorizes, processes and distributes specimens to CDC laboratories for reference diagnostic testing, research studies, and epidemics and reports diagnostic test results to submitting organizations; (13) manages all CDC

exports and ensures compliance with regulations and serves as CDC liaison with Department of Commerce for export related issues; (14) maintains the CDC Atlanta laboratory water treatment systems; (15) provides collaborative development and production services to produce high priority reference reagents and specialized diagnostics for internal NCID investigators. (Approved 10/25/99)

Animal Resources Branch (HCRL2)

(1) Acquires and distributes laboratory animals for research; (2) provides veterinary services and animal husbandry for experimental animals, and collaborates on research using laboratory animals; (3) ensures the standardization of animal husbandry procedures in the Atlanta Area CDC Animal Facilities; (4) develops standard operating procedures for animal care and use in accordance with policies established by the CDC Animal Policy Board and those endorsed by the American Association for Accreditation of Laboratory Animal Care; (5) conducts applied research to improve the care and use of animals for research and testing; (6) provides veterinary care, including clinical and surgical support for the care and use of laboratory animals; (7) conducts laboratory animal technology training for investigators, technicians, and animal care personnel. (Approved 10/22/99)

Biologics Branch (HCRL3)

(1) Establishes and practices quality control and assurance procedures to ensure high product quality and integrity and compliance with changing FDA regulations and GMP standards; (2) provides consultation and training to CDC laboratorians and extramural organizations on cell culture techniques, media production methods and related procedures; (3) conducts applied and basic research, independently and collaboratively, on problems related to mammalian cell cultures, cell biology, expression systems, specialized diagnostics, microbiologic fermentation, and hybridomas; (4) develops, produces, evaluates, or procures and distributes mammalian primary cell cultures, cell lines, hybridomas, cell culture and microbiological media, chemical reagents, animal blood products and in vitro diagnostic products to CDC scientists for diagnostic and research purposes; (5) manages a bank of cell line cultures for use in diagnostic and research activities; (6) in coordination with NCID/OD, determines the need and priorities for development of infectious pathogen reference diagnostic reagents and collaborates with CDC laboratory personnel in developing new and improved hybridomas and reference diagnostic reagents; (7) manages the CDC Reference Reagent Inventory, processes requisitions, distributes, and provides information to CDC and non-CDC laboratorians on infectious pathogen reference reagents; (8) provides dispensing, lyophilizing, capping, and labeling services for products prepared at CDC; (9) provides and maintains a fermentation facility for routine service fermentations and research projects; (10) maintains a computer system for ordering products and services available from the CDC Biologics Catalog. (Approved 10/25/99)

Biotechnology Core Facility Branch (HCRL4)

(1) Provides to NCID components the instrumentation and expertise required to develop, refine, and apply modern technologies pertinent to the prevention and control of infectious, autoimmune, neoplastic, and hematologic diseases; (2) provides synthetic oligonucleotides useful in the analysis of the genetics of pathogens and in the development of rapid diagnostic tests; (3) develops methodologies for automated DNA sequence analysis and assists in their application; (4) determines the physicochemical properties and the primary amino acid sequence of proteins of biological interest; (5) provides synthetic peptides to facilitate studies of antigen/antibody interactions and to aid in the formulation of synthetic vaccines; (6) participates as a reference laboratory in standardizing methods and materials for protein chemistry; (7) acquires and maintains computer software for the analysis of biological macromolecules, and assists other NCID researchers in its use.

Specimen Management Branch (HCLR6)

(1) Stores serum collections and other biological specimens that relate to ongoing and approved epidemiologic, surveillance, and special project studies; (2) receives, processes, catalogs, stores, and distributes biological specimens and associated information to qualified investigators upon request; (3) receives, processes, stores, and distributes AIDS and AIDS related plasma/serum/mononuclear cell specimens; (4) provides controlled rate freezing for cells and tissues; (5) procures, processes, and distributes human blood and blood products; (6) maintains a comprehensive inventory and tracking system of inventoried specimen collections; (7) coordinates technical data and specimen handling services for laboratory activities of CDC programs; (8) provides consultation and training in technical services; (9) receives and ships infectious substances and other material for CDC laboratories. (Approved 10/25/99)

Laboratory Support Branch (HCRL7)

(1) Coordinates technical services for laboratory activities of CDC programs including procurement, processing, and distribution of glassware and related items, laboratory waste decontamination and disposal, laundry services, laboratory equipment management and maintenance, and materiel management; (2) provides consultation and training in technical services; (3) maintains laboratory water treatment systems to ensure quality of CDC reagent laboratory water. (Approved 10/25/99)

Division of Bacterial and Mycotic Diseases (HCRP)

(1) Conducts surveillance, investigations, and studies of bacterial, fungal, and actinomycotic diseases to define disease etiology and develop effective methods for diagnosis, prevention, and control; (2) conducts or participates in clinical, field, and laboratory research to develop, evaluate, and improve laboratory methodologies and materials and therapeutic practices used for diagnosis, treatment, investigation, and control of bacterial, fungal, and actinomycotic diseases; (3) conducts research on development and evaluation of immunizing agents and the role of protective immunity in the disease process; (4) provides epidemic aid and epidemiological consultation, upon request, to State and local health departments, other Federal agencies, and national and international health organizations; (5) provides reference/diagnostic services for bacterial, fungal, and actinomycotic diseases to State and local health departments, other Federal agencies, and national and international health organizations; (6) provides scientific and technical assistance to other NCID components when the work requires unique expertise or specialized equipment not available in other components; (7) provides intramural and extramural technical expertise and assistance in professional training and proficiency testing activities; (8) serves as appropriately designated national and international reference centers for various bacterial, fungal, and actinomycotic diseases and disease groups.

Biostatistics and Information Management Branch (HCRP3)

(1) Provides statistical methodology and participates in the Division's epidemic investigations, surveillance systems for ongoing surveillance; (2) designs disease reporting systems for ongoing surveillance; (3) provides statistical consultation for Division personnel, other CDC officials, public health officials and other scientific researchers outside the CDC; (4) develops methods or adapts existing methods for laboratory research studies; (5) coordinates Division information management with NCID, IRMO, and other CDC organizations; (6) provides statistical training for professional staff of the Division; (7) sets Division policy on statistical procedures, analysis of surveillance data, and procedures for data collection and processing. (Approved: 11/10/2003)

Respiratory Diseases Branch (HCRP2)

(1) Conducts epidemiologic and laboratory studies to monitor burden of diseases (e.g. survillance), provides assistance in control of epidemics and exploits opportunities to improve control and prevention of respiratory and other syndromes caused by Streptococcus pneumoniae, group A and B streptococci, atypical respiratory bacteria (Legionella, Mycoplasma, and Chlamydia species), and Haemophilus influenzae in resource poor areas; as well as community-acquired drug resistant bacterial infections, community-acquired pneumonia and neonatal sepis; (2) coordinates divisional activities related to Active Bacterial Core surveillance (ABCs) with the Emerging Infections Program states; (3) facilitates development and evaluation of immunizing agents for prevention and characterization of the immune response to pathogens listed above as well as for Neisseria meningitidis; (4) provides reference and diagnostic activities for respiratory bacterial diseases and for the identification of unknown gram positive cocci; (5) develops, implements and evaluates prevention strategies for these diseases as well as promotion of appropriate antimicrobial use and control of antimicrobial resistant respiratory infections; (6) maintains WHO collaborating centers for Streptococci and for Research and Reagents for Human selected human bacterial diseases; (8) collaborates with other CDC C/I/O, NCID divisions, state and federal agencies, WHO, PAHO, private industry and academia, and other governmental organizations involved in public health. (Approved: 12/7/2003)

Meningitis and Special Pathogens Branch (HCRP8)

(1) Conducts epidemiologic and laboratory studies to monitor burden of diseases (e.g. surveillance), provides assistance in control of epidemics and exploits opportunities to improve control and prevention of bacterial illness including: meningitis, zoonoses, (leptospirosis, brucellosis and anthrax), mycobacterium infections other than tuberculosis, toxic shock syndrom, Brazilian purpuric fever and unexplained deaths and serious illnesses; (2) provides laboratory support for diphtheria and pertussis; (3) provides reference and diagnostic activities for agents causing these diseases and for the identification of unknown bacterial isolates associated with human diseases; (4) participates in the development and evaluation of vaccines for these diseases; (5) develops, implements and evaluates prevention strategies for these diseases; (6) maintains WHO collaborating centers for: control and prevention of epidemic meningitis and epidemiology of leptospirosis; (7) collaborates with other CDC C/I/O, NCID division, state and Federal agencies, Ministers of Health, WHO, PAHO, private industry and other governmental organizations involved in public health. (Approved: 12/7/2003)

Mycotic Diseases Branch (HCRP6)

(1) In collaboration with other CDC C/I/Os and other NCID divisions, conducts laboratory studies and provides epidemic aid, surveillance, and consultation on the control of emerging, reemerging, and opportunistic mycotic diseases; (2) provides reference and diagnostic activities for agents causing these diseases and for the identification of unknown mycotic isolates associated with human disease; (3) performs studies to determine host-parasite factors related to human diseases caused by emerging, reemerging, and opportunistic mycotic agents; (4) coordinates and collaborates in national and international studies and surveillance for mycotic diseases; (5) develops and evaluates methods for the diagnosis of emerging, reemerging, and opportunistic mycotic diseases; (6) develops, implements, and evaluates prevention strategies for these diseases; (7) collaborates with other CDC Centers/Institutes/Offices, NCID divisions, state and Federal agencies in addressing reemerging mycotic diseases.

Foodborne and Diarrheal Diseases Branch (HCRP9)

(1) Conducts laboratory studies and provides epidemic aid, surveillance, consultation on the control of foodborne and waterborne outbreaks of acute gastrointestinal illness; (2) provides reference and disease surveillance activities for agents of selected foodborne, waterborne, and other bacterial enteric diseases; (3) performs studies to determine host-parasite factors related to foodborne, waterborne, and other bacterial

enteric diseases; (4) coordinates and collaborates in national and international enteric disease studies, including foodborne diseases; (5) coordinates program activities regarding minority health issues within the Division and with appropriate organizations outside the Division; (6) coordinates travel health issues with the Division of Quarantine in the National Center for Prevention Services; (7) develops, implements, and evaluates prevention strategies for bacterial enteric diseases affecting persons in resource-poor settings; (8) develops and implements prevention strategies for foodborne and waterborne diseases in consultation with food safety regulatory agencies and the food industry. (Approved: April 16, 1993)

Division of Parasitic Diseases (HCRS)

(1) Conducts surveillance, investigations, and studies of parasitic diseases to define disease etiology, mode of transmission, and populations at risk and to develop effective methods for diagnosis, prevention, and control; (2) conducts or participates in clinical, field, and laboratory research to develop, evaluate, and improve laboratory methodologies and materials and therapeutic practices used for rapid and accurate diagnosis and treatment of parasitic diseases; (3) collaborates with the Division of Vector-Borne Infectious Diseases in providing training in the epidemiology and control of vector-borne diseases; (4) provides epidemic aid and epidemiologic consultation, upon request, to State and local health departments, other Federal agencies, and national and international health organizations; (5) provides reference/diagnostic services for parasitic diseases to State and local health departments, other Federal agencies, and national and international health organizations; (6) conducts a program of research and development in the biology, ecology, host-parasitic relationships, and control of vectors of arthropod-borne parasitic diseases including development, application, and analysis of pesticides for vector control; (7) conducts laboratory studies of selected parasitic infections, emphasizing animal in vitro model systems for parasitic relationships, chemotherapy, and immunology, to develop effective methods for diagnosis, prevention, and control; (8) conducts research and collaborates on development and evaluation of immunizing agents and the role of protective immunity in the disease process; (9) provides scientific and technical assistance to other components when the work requires unique expertise or specialized equipment not available in other NCID components; (10) provides intramural and extramural technical expertise and assistance in professional training; (11) serves as World Health Organization (WHO) Collaborating Center for Research Training and Control of Dracunculiasis.

Data Management Activity (HCRS-2)

(1) Provides statistical and information systems consultation for study design and protocol development; (2) designs and implements database management systems in support of DPD projects; (3) provides data analysis and statistical consultations in support of DPD projects; (4) assists in production of, and provides graphics support for, presentations and manuscripts related to DPD objectives; (5) evaluates new software for statistical analysis, database management, graphics production, geographical information systems, and other functions related to DPD objectives. (Approved: 11/10/2003)

Parasitic Diseases Epidemiology Branch (HCRS2)

(l) Provides epidemiologic assistance, when requested during outbreaks, and for laboratory and field-based research projects; (2) develops and participates in the implementation of appropriate control and prevention strategies; (3) provides clinical advice and epidemiologic assistance on the diagnosis, treatment, control, and prevention of non-malarial parasitic diseases to health care providers; state, local and federal agencies; national and international organizations; public health professionals; and to the public at large; (4) serves as the WHO Collaborating Centers for the Control and Elimination of Lymphatic Filariasis in the Americas, and for Research, Training and the Eradication of Dracunculiasis; (5) to provide rare and otherwise available antiparasitic drugs to domestic and international healthcare providers for the treatment of parasitic diseases; and (6) ensures

compliance with FDA regulations concerning the use of antiparasitic drugs provided by the CDC Drug Service. This mission is carried out in a workplace that promotes professional development and recognizes the importance of the individual and the team, and through partnerships with other domestic and international organizations, agencies, and individuals. (Approved 4/25/01)

Malaria Epidemiology Branch (HCRS6)

(1) monitor the frequency and distribution of malaria cases that occur in U.S. residents and visitors; (2) monitor the efficacy and safety of antimalarial drugs for chemoprophylaxis and chemotherapy; (3) offer clinical advice and epidemiologic assistance on the treatment, control, and prevention of malaria in the United States and in malaria endemic countries; (4) offer epidemiologic assistance for laboratory and field-based research projects; (5) provide assistance to international and United States agencies and organizations on issues of malaria control and prevention. This mission is carried out in a workplace that promotes professional development and recognizes the importance of the individual and the team. The services are provided through partnerships with health care professionals, state, local and federal agencies within the United States, foreign governments, national and international organizations, and the public. (Approved 4/25/01)

Entomology Branch (HCRS3)

(1) Conducts laboratory and field vector biology studies to develop, implement, and evaluate appropriate vector control strategies; (2) conducts molecular, biochemical and genetic research to develop new vector-based control strategies; (3) develops and applies microanalytical methods for assay of pesticides in the environment and to support biochemical studies of pesticide resistance; (4) develops and applies methods to assay antiparasitic drugs in pharmaceutical products and such drugs and their metabolites in body fluids and tissues of humans and other animals; (5) serves as a WHO Collaborating Center for research on basic principles of insecticide formulations, chemical and physical methods, develops and validates methods for pesticide analysis, and develops specifications for the purchase of formulations used in vector control; (6) collaborates with the Division of Vector-Borne Infectious Diseases and other national and international agencies and countries in entomological training, technology transfer, and control of vector-borne diseases; (7) provides entomological consultation and evaluation services on request by the Division to local, State, federal and international health organizations. (Approved 4/21/94)

Biology and Diagnostics Branch (HCRS4)

(1) Conducts field and laboratory investigations on the etiology, biology, ecology, populations at risk, host-parasite relationships, chemotherapy, and diagnosis of parasitic diseases; (2) provides advice, assistance and training on the diagnosis, control, and prevention of parasitic diseases; (3) provides reference/diagnostic services for parasitic diseases; (4) develops and/or utilizes current methodologies for diagnosis of parasitic infections; (5) conducts laboratory studies of selected parasitic infections, emphasizing animal models and in vitro systems for host-parasite relationships, chemotherapy, and vaccine studies; (6) conducts research programs in the biology, ecology, and host-parasite relationships of parasitic infections. (Approved 4/21/94)

Immunology Branch (HCRS5)

(1) Conducts research on basic immunologic events in parasitic infections; (2) identifies, characterizes, and defines, based on immunologic interactions between host and parasite, potential intervention strategies for the control and prevention of parasitic infections; (3) develops, improves, and implements methodologies for diagnosis, immunization, and treatment of parasitic infections, leading to their control and prevention. (Approved 4/21/94)

Division of Vector-Borne Infectious Diseases (HCRT)

(1) Conducts surveillance, investigations, and studies of vector-borne viral and bacterial diseases and plague to define disease etiology and to develop effective methods and strategies for diagnosis, prevention, and control; (2) conducts investigations on the biology, ecology, and control of arthropod vectors of viral and bacterial diseases as a basis for development of new and/or modification of existing measures for more effective prevention and control; (3) conducts or participates in clinical, field, and laboratory studies to develop, evaluate, and improve laboratory methods and materials and therapeutic practices used for diagnosis, prevention, and treatment of vector-borne infectious diseases; (4) provides epidemic aid and epidemiologic consultation, upon request, to State and local health departments, other Federal agencies, and national and international health organizations; (5) provides reference/diagnostic services for vector-borne viral and bacterial diseases to State and local health departments, other Federal agencies, and national and international health organizations; (6) conducts research and collaborates on development and evaluation of immunizing agents and the role of protective immunity in the disease process; (7) provides guidance and scientific direction to the San Juan, Puerto Rico, field activities for application of effective programs in surveillance, diagnosis, prevention, and control of dengue fever; (8) provides scientific and technical assistance to other NCID components when the work requires unique expertise or specialized equipment not available in other components; (9) provides intramural and extramural technical expertise and assistance in professional training activities; (10) serves as appropriately designated national and international reference centers for vector-borne viral and bacterial diseases.

Arbovirus Diseases Branch (HCRT3)

(1) Conducts surveillance, field investigations and laboratory studies of vector-borne viral agents and their vectors; (2) defines disease etiology, ecology, and pathogenesis in order to develop methods and strategies for disease diagnosis, surveillance, prevention and control; (3) provides diagnostic reference consultation, epidemic aid and epidemiologic consultation, upon request, to State and local health departments, other components of CDC, other Federal agencies, and national and international health organizations; (4) provides intramural and extramural technical expertise and assistance in professional training activities; (5) functions as a World Health Organization Collaborating Center for Reference and Research on Arboviruses. (Approved 7/15/96)

Bacterial Zoonoses Branch (HCRT4)

(1) Develops and maintains surveillance for vector-borne bacterial zoonoses with emphasis on Lyme disease, plague, tularemia, and relapsing fever; (2) provides consultation, laboratory services, epidemiologic services, and epidemic aid to local and State health departments and to national and international agencies for these same diseases; (3) conducts laboratory and field research on vector-borne bacterial zoonoses to improve diagnosis, prevention, and control; (4) trains technical and professional personnel in diagnostic, reference, and research laboratory methods, epidemiology, disease ecology and control; (5) serves as the World Health Organization (WHO) Collaborating Center for Plague Reference and Research and the National Center for Lyme Disease Reference and Research. (Approved 7/15/96)

Dengue Branch (HCRT5)

(1) Develops and maintains national and international surveillance for dengue and dengue hemorrhagic fever; (2) provides laboratory reference and diagnostic services to local, State, national, and international health agencies; (3) provides epidemic aid and investigates dengue epidemics; (4) conducts field and laboratory research on the biology, behavior and control of *Aedes aegypti* and other mosquito vectors of dengue; (5) conducts research on and provide consultation and assistance to local, State, national, and international health

agencies on improved methods for surveillance, prevention, and control of epidemic dengue; (6) provides training in laboratory and clinical diagnosis, and on surveillance, prevention, and control of dengue; (7) develops, implements, and evaluates new community-based intervention strategies for prevention of epidemic dengue; (8) serves as the WHO Collaborating Center for Reference and Research on Dengue Hemorrhagic Fever. (Approved 7/15/96)

Division of Viral and Rickettsial Diseases (HCRU)

- (1) Conducts surveillance, investigations, and studies of viral and rickettsial diseases to define their etiology and epidemiology and to develop effective methods for prevention, diagnosis, treatment, and control; (2) conducts or participates in clinical, field, and laboratory research to develop, evaluate, and improve laboratory methods, materials, and therapeutic practices used for prevention, diagnosis, treatment, and control of viral, rickettsial, and prion diseases; (3) conducts research on virus transmission to develop effective prevention and control strategies and on vaccine effectiveness to assess prevention potential; (4) conducts laboratory, clinical, and epidemiologic studies of highly hazardous disease agents that require biosafety level 3 or biosafety level 4 security for their safe handling; (5) conducts ecological studies to develop and evaluate disease prevention and control measures;
- (6) provides epidemic aid, epidemiologic consultation, reference and diagnostic services, and technical assistance to state and local health departments, other federal agencies, and national and international health organizations; (7) provides scientific and technical assistance to other National Center for Infectious Diseases (NCID) and Centers for Disease Control and Prevention (CDC) components when the work requires unique expertise or specialized equipment not available in other components; (8) provides routine and specialized laboratory training in the diagnosis, isolation, and characterization of viral and rickettsial agents to personnel from state and local health departments and other national and international organizations; (9) provides training opportunities for Epidemic Intelligence Service officers and others in CDC sponsored programs, including postgraduate students, postdoctoral fellows, and other public health and laboratory scientists; (10) provides expert pathological support for various infectious diseases to state and local health departments, other NCID components, and national and international organizations; and (11) serves as appropriately designated national and World Health Organization collaborating centers for viral and rickettsial diseases. (Approved 4/4/02)

Office of Director (HCRU1)

(1) Directs and administers the programs and activities of the Division of Viral and Rickettsial Diseases (DVRD); (2) provides leadership and counsel on policy development and interpretation, budget formulation, and program planning, development, management, operations, and evaluation; (3) provides DVRD-wide administrative and programmatic services and coordinates or ensures coordination with the appropriate NCID or CDC staff offices; (4) provides liaison with other governmental agencies, international organizations, and other groups; (5) coordinates, in collaboration with the appropriate NCID and CDC components, international health activities related to the prevention and control of viral, rickettsial, and prion diseases; (6) coordinates, in collaboration with the appropriate CDC, PHS, and non-government components, CDC=s activities to monitor and improve the safety of blood and blood products in the United States and international settings, including development and enhancement of surveillance systems, conduct of epidemic investigations and risk assessment studies, and development and evaluation of prevention strategies; (7) serves as a liaison between CDC and other PHS agencies, the Department of Health and Human Services, non-governmental organizations, and professional groups on blood safety issues through active participation in federal advisory committees and technical committees; (8) conducts surveillance and epidemiologic investigations to facilitate the understanding and control of prion diseases, Reye syndrome, and Kawasaki syndrome; (9) serves as the primary disseminator of information from CDC, including clinical and disease prevention consultations to state and local health departments and/or federal and international agencies on the illnesses and syndromes caused by or related to

viruses, rickettsiae, and prions; (10) augments the statistical and epidemiologic resources for the branches within the Division through provision of consultations and support for specific projects or investigations and helps develop, support, and coordinate statistical activities at the division level; (11) provides scientific and editorial review and clearance of manuscripts for publication, abstracts for presentation, protocols for Institutional Review Board (IRB) and human subjects review, and other scientific, programmatic, and informational materials; and (12) coordinates the implementation of a comprehensive public health communication program for the prevention and control of diseases caused by viruses, rickettsiae, and prions. (Approved 4/4/02)

<u>Information Technology Activity (HCRU12)</u>

(1) continuously consults with user community to ascertain information technology needs and to develop strategic and action plans; (2) provides technical expertise in the design, development, and support of database management systems; (3) in collaboration with other branches and activities, develops systems to facilitate the acquisition of surveillance data electronically; (4) represents the division on NCID and CDC workgroups and councils and in other IRM related activities; (5) provides graphic support for presentation and desktop publishing; (6) provides intranet services, technical expertise, and support for the development and implementation of web services; (7) provides technical and cost related consultation to DVRD=s Office of the Director and Branches; (8) provides assistance to the end-user community for understanding new technology through information dissemination, coordination, and establishment of training; and (9) provides assurance that IRM regulations, policies, procedures, and standards are incorporated into the Division=s information technology plans and activities. (Approved: 11/10/2003)

Infectious Disease Pathology Activity (HCRU13)

(1) Serves as a scientific and technical resource to NCID by providing expertise in histopathology, molecular pathology, and ultrastructural analysis for detecting infectious disease agents and studying the interactions between microbial agents and host cells; (2) develops, improves, evaluates, and applies special immunohistologic, ultrastructural, and/or nucleic acid probe technologies for detecting microbial agents and/or expressed gene products in tissue specimens or tissue culture; (3) conducts basic and applied research into the pathogenesis of infectious diseases; (4) provides intramural and extramural technical and professional expertise for assistance in training in infectious disease pathology and molecular approaches to the identification of specific nucleic acid sequences and special antigens in tissue specimens; (5) provides for tracking, distribution, and testing of reference/diagnostic pathology specimens submitted through the data and special handling system; (6) provides histopathology, molecular pathology, and ultrastructure reference/diagnostic support and epidemic aid to state and local health departments, other federal agencies, and national and international health organizations; and (7) serves as the WHO Collaborating Center for Reference Pathology of Hemorrhagic Fevers and other Infectious Diseases. (Approved 4/4/02)

Influenza Branch (HCRU2)

Provides leadership and technical expertise for national and international programs aimed at improving the prevention and control of both epidemic and pandemic influenza. In carrying out this mission, the Influenza Branch: (1) conducts global and national surveillance to identify novel variants with the potential to cause influenza epidemics and pandemics and monitors associated disease activity; (2) conducts investigations of important or unusual international and domestic influenza outbreaks; (3) conducts epidemiological and laboratory investigations to increase knowledge about influenza and to improve its prevention and control; (4) provides information and recommendations on the use of vaccines, antiviral agents, and other modalities to prevent, control, and treat influenza; (5) serves as the WHO Collaborating Center for Reference and Research on Influenza; (6) provides influenza reagents to World Health Organization Collaborating Laboratories

worldwide and maintains a reference collection of human, swine, and avian influenza viruses and antisera; (7) performs reference antigenic analysis, molecular biologic analysis of influenza virus isolates, and post-vaccination human serologic studies for vaccine strain selection; (8) conducts studies into the evolution, structure, replication, immunology, and pathogenesis of influenza viruses; (9) evaluates influenza vaccine and antiviral agents developed elsewhere; (10) develops and evaluates novel, improved influenza vaccines and vaccines that might be used in the case of an influenza pandemic; (11) develops, evaluates, and improves new techniques and reagents for the diagnosis of influenza in humans as well as the rapid identification of avian and swine influenza viruses that may cause human infections; (12) supports applied research directed toward improved influenza prevention and control; (13) provides support for national epidemiologic and laboratory capacity building; (14) initiates and conducts national and international laboratory and epidemiologic training courses; and (15) provides technical expertise and leadership for national and international pandemic planning activities. (Approved 4/4/02)

Respiratory and Enteric Viruses Branch (HCRU6)

(1) Provides reference/diagnostic services and conducts epidemiological studies and multinational surveillance for respiratory and enteric diseases; (2) monitors respiratory and enteric virus diseases through the National Respiratory and Enteric Virus Surveillance System, the National Enterovirus Surveillance System, and the Global Surveillance Program for Wild Polioviruses; (3) conducts clinical and epidemiologic studies and investigates outbreaks related to respiratory and enteric virus diseases; (4) conducts studies of the biology, biochemical and antigenic characteristics, and immunology and pathogenesis of respiratory and enteric viruses and associated disease; (5) develops, analyzes, and improves diagnostic methods and reagents for respiratory and enteric viruses, (6) develops and evaluates vaccines and vaccination programs for measles virus, rotavirus, and non-influenza respiratory viruses; (7) provides support for global eradication of measles virus and poliomyelitis; and (8) serves as the WHO Collaborating Center for Virus Reference and Research for Respiratory Virus Diseases Other Than Influenza, the WHO Collaborating Center for Virus Reference and Research (Enteroviruses), the WHO Collaborating Center for Polio, the WHO Collaborating Center for Rotavirus Investigators, and the WHO Collaborating Center for Measles (Approved 4/4/02)

Special Pathogens Branch (HCRU7)

(1) Provides epidemic aid and conducts epidemiologic studies on the detection, prevention, and control of highly hazardous viral diseases; (2) provides primary isolation, identification, and characterization of highly hazardous disease agents that require biosafety level 3 or biosafety level 4 laboratory conditions for their safe handling; (3) develops, evaluates, and improves methods for treatment, prevention, and laboratory diagnosis of hazardous disease agents; (4) conducts laboratory, clinical, and epidemiologic investigations on the pathogenesis, pathophysiology, and prevention of viral infections caused by highly hazardous viruses; (5) provides consultation on the clinical and epidemiologic management of suspected cases and/or epidemics of these diseases, including rapid development of a field laboratory; (6) consults with national and international scientists on the design, staffing, and efficient operation of a high hazard pathogen laboratory program; (7) serves as a WHO Collaborating Center for Virus Reference and Research for Viral Hemorrhagic Fevers; and (8) develops and evaluates health education programs for educating the general public and health professionals about infection, treatment, infection control in clinical settings, prevention, and laboratory diagnosis of highly hazardous viral diseases. (Approved 4/4/02)

Viral Exanthems and Herpes Virus Branch (HCRU8)

(1) Conducts surveillance and laboratory-based epidemiologic studies of chronic fatigue syndrome (CFS); (2) serves as the WHO Collaborating Center for Smallpox and Other Poxvirus Infections and provides reference/diagnostic services for suspected smallpox and other poxvirus infections, with emphasis on

bioterrorism; (3) serves as the Varicella Zoster Virus National Laboratory; (4) conducts laboratory-based epidemiologic studies of human papillomavirus (HPV) infection and diseases with emphasis on control/prevention of cervical cancer and recurrent respiratory papillomatosis; (5) conducts laboratory-based epidemiologic studies of herpesviruses, with emphasis on infections in immunocompromised hosts, congenital and perinatal infections, and disease; (6) conducts research concerning human immune responses to herpes, HPV, and poxviruses; (7) develops, evaluates, and improves methods and reagents for rapid diagnosis of viral infections; (8) provides epidemiology, molecular biology, diagnostic serology/virology, and immunology consultation and collaboration to national and international organizations concerning prevention and control of CFS, poxvirus, HPV, and herpesvirus diseases, virus-associated cancers, and vaccine programs; and (9) provides assistance regarding DNA virus infection and associations between viruses, host genetics, host immune response, and human disease as necessary. (Approved 4/4/02)

Viral and Rickettsial Zoonoses Branch (HCRU9)

- (1) Provides epidemic aid, consultation, surveillance, and epidemiologic and ecologic investigations of viral, rickettsial, and bartonella-associated zoonoses domestically and internationally; (2) conducts studies on the microbiology, molecular biology, pathogenesis, and pathology of viral, rickettsial, and bartonella-associated zoonotic infections: (3) provides reference/diagnostic services domestically and internationally; (4) develops, evaluates, and improves methods and reagents for diagnosing viral, rickettsial, and bartonella-associated diseases; (5) develops and evaluates human and animal vaccines and other prophylactic agents for zoonotic diseases and prepares recommendations for their use;
- (6) serves as a WHO Collaborating Center for Reference and Research on Rabies and a WHO Collaborating Center for Rickettsial and Bartonella-associated Reference and Research; (7) provides consultation and laboratory training to state and local health departments and other national and international organizations; (8) responds to requests for information regarding viral, rickettsial, and bartonella-associated zoonotic diseases and their prevention from CDC, health care providers, academic institutions, state and local health departments, other government agencies, and the general public;
- (9) collaborates with government agencies, domestic and international academic institutions, and the private sector in developing novel diagnostic assays and vaccines for viral, rickettsial, and bartonella-associated zoonotic diseases; and (10) maintains the Bioterrorism Laboratory for Coxiella burnetii (Q fever) and rickettsial response and research. (Approved 4/4/02)

Division of Viral Hepatitis (HCR4)

(1) Conducts surveillance and special studies to determine the epidemiology and disease burden associated with acute and chronic infections and liver disease associated with hepatitis viruses; (2) conducts epidemiologic and laboratory studies, including outbreak investigations, to determine risk factors for transmission of infections with hepatitis viruses, define the natural history and pathogenesis of these infections, and determine their health impact; (3) conducts epidemiologic, clinical, laboratory, behavioral, and health communications research to develop and evaluate methods and strategies for the prevention of infections with hepatitis viruses and their acute and chronic disease consequences; (4) develops, implements, communicates, and evaluates recommendations and standards for the prevention and control of infections and liver disease associated with hepatitis viruses; (5) provides technical and programmatic leadership and assistance to state and local health departments, non-governmental organizations, and the international community to develop, implement, and evaluate programs to prevent infections with hepatitis viruses and their consequences, including immunization to prevent hepatitis A and eliminate transmission of hepatitis B virus infection, counseling and testing to prevent and control hepatitis C virus infection, and improvement of transfusion and medical practices and reduced frequency of unsafe injections to prevent transmission of bloodborne virus infections, including hepatitis viruses; (6) provides leadership and coordination to integrate viral hepatitis prevention and control activities into other

prevention programs conducted by CDC, other Federal agencies, and health care providers; (7) conducts laboratory, clinical, and epidemiologic studies to develop and evaluate methods for the diagnosis of infections with hepatitis viruses; (8) identifies and characterizes agents and host factors associated with hepatitis and acute and chronic liver disease; (9) provides epidemic aid, epidemiologic and laboratory consultation, reference diagnostic services, and technical assistance to state and local health departments, other federal agencies, other components of CDC, and national and international health organizations; (10) disseminates information through health communications materials, tools and programs, scientific publications, and presentations; (11) provides training opportunities for Epidemic Intelligence Service Officers and others in CDC sponsored programs, including postgraduate students, post-doctoral fellows, and other public health and laboratory scientists; and (12) serves as a WHO Collaborating Center for Reference and Research on Viral Hepatitis. (Approved 4/4/02)

Office of the Director (HCR41)

(1) Directs, administers, and provides oversight for the programs and activities of DVH, including budget formulation and administration; (2) provides leadership and counsel on policy development and interpretation and on program planning, development, management, and evaluation; (3) provides Division-wide administrative and program support services and coordinates and ensures coordination with the appropriate National Center for Infectious Diseases (NCID) and Centers for Disease Control and Prevention (CDC) staff offices; (4) provides the leadership and coordination, including serving on appropriate advisory committees, to integrate viral hepatitis and liver disease prevention and control activities into other prevention programs conducted by NCID, CDC, Department of Health and Human Services, other Federal agencies, international organizations, and other groups; (5) provides leadership and oversight to the provision of state-or-the-art informatics for DVH, including information systems, computer programs, programming and data management support, and management of DVH internet and intranet websites; (6) provides manuscript review and clearance and coordination and oversight for studies, human subjects review, OMB clearance, Freedom of Information Act (FOIA) requests, other controlled correspondence, and requests for information; (7) coordinates and provides oversight for continuing professional education programs for DVH staff; and (8) provides support to DVH components in writing and editing, preparation of graphics and other visual arts, and conference and exhibit planning, management, and execution. (Approved: 11/10/2003)

Epidemiology Branch (HCR42)

(1) Monitors and evaluates rates and risk factors associated with acute and chronic infections with hepatitis viruses, viral hepatitis and liver disease through surveillance systems and special studies, including sentinel surveillance; (2) conducts research, including outbreak investigations, clinical trials and population-based demonstration projects, to determine the epidemiology of transmission of known and new hepatitis viruses and their variants, the natural history of infections with hepatitis viruses, evaluate the performance of diagnostic tests for hepatitis virus infections, and evaluate methods and approaches for the prevention and control of hepatitis virus infections; (3) estimates disease burden attributable to infections with hepatitis viruses and the effectiveness of programs to prevent these infections; (4) provides consultation to state, local, national, and international authorities for the prevention and control of viral hepatitis, the investigation of disease outbreaks, and surveillance of hepatitis and liver disease; (5) disseminates information through scientific publications and presentations; and (6) provides training opportunities for Epidemic Intelligence Service Officers and others in CDC sponsored programs, postgraduate students, post-doctoral fellows, and other public health scientists. (Approved 4/4/02)

Prevention Branch (HCR43)

(1) Develops, administers, implements, and evaluates domestic and international programs to prevent viral hepatitis, including those that serve clients in the public and private sectors, through state and local health departments, health organizations, academic institutions, and non-governmental organizations; (2) provides leadership and coordination for viral hepatitis and liver disease prevention and control programs with other components of CDC, other Federal agencies, and non-governmental agencies and partners; (3) conducts research to ascertain educational and communication needs, best methods of communication, and effectiveness of educational programs for health professionals, the public, and persons in groups at risk for infection with hepatitis viruses and develops and disseminates accurate, timely and effective educational materials, tools, and programs related to the prevention of viral hepatitis and liver disease; (4) develops and implements accurate, timely, and effective educational tools, materials and programs for prevention of viral hepatitis and liver disease; (5) develops and conducts studies, including economic and behavioral studies, to evaluate the effectiveness of interventions and programs to prevent viral hepatitis and to identify barriers to prevention services such as immunization, counseling, testing, medical referral, and management; (6) develops and evaluates health services models for prevention of infection with hepatitis viruses and associated liver disease; (7) provides leadership and coordinates the development of national standards and performance objectives for prevention of viral hepatitis and liver disease and works with agencies and partners to adopt these standards; (8) develops indicators and measures by which to evaluate the performance and effectiveness of viral hepatitis prevention programs; (9) disseminates information through scientific publications and presentations; and (10) provides training opportunities for Epidemic Intelligence Service Officers and others in CDC sponsored programs, postgraduate students, post-doctoral fellows, and other public health scientists. (Approved 4/4/02)

<u>Laboratory Branch (HCR44)</u>

(1) Conducts research and applies state-of-the-art laboratory methods in support of studies related to the epidemiology, molecular epidemiology, and natural history of acute and chronic infections with hepatitis viruses and liver disease; (2) conducts research to develop and validate diagnostic approaches to identify infections with hepatitis viruses; (3) develops and evaluates methods to prevent acute and chronic infection and disease outcomes, including vaccines; (4) determines the viral, immunologic, and other host responses to infection with hepatitis viruses in humans and animal models; (5) identifies and characterizes agents that cause hepatitis; (6) provides reference diagnostic testing for markers of infection with hepatitis viruses for state and local public health laboratories; (7) provides the leadership and collaboration to ensure the transfer to public health laboratories, both nationally and internationally, state-of-the-art methods and approaches for the identification and diagnosis of infections with hepatitis viruses; (8) develops and maintains archives of clinical specimens from clinical trials and epidemiologic and laboratory studies; (9) disseminates information through scientific publications and presentations; and (10) provides training opportunities for persons in CDC sponsored programs, postgraduate students, post-doctoral fellows, and other public health scientists. (Approved 4/4/02)